CIVIL RIGHTS COMPLAINT 42 U.S.C. § 1983

UNITED STATES DISTRICT COURT EASTERN DISTRICT OF NEW YORK		ORIGINAL 智慧	
Brandon McFa	x dden	ONTOINAL	ROS.
Full name of plaintiff/prisoner ID#		AMEND COMPLAINT 12-CV-5624	•
	Plaintiff,	(RRM)(VVP) JURY TRIAL DEMAND YES_XNO	
-against- The City of (NYC,Central		
	ection Officers,		
Sgt,ect.			
Enter full names of a [Make sure those listing identical to those listing i	ted above are		
	Defendants. x		
I. Previous Lav	vsuits:		
Α.	dealing with the same	facts involved in this action or your imprisonment? Yes (X) No (')	
В.	If your answer to A is yes, describe each lawsuit in the space below (If there is more than one lawsuit, describe the additional lawsuits on another piece of paper, using the same outline.)		
,	1. Parties to this prev	ious lawsuit:	
	Plaintiffs:	Brandon McFadden	
	Defendants:	NEW YORK STATE DIVISION OF PAROLE/DEPARTMENT OF CORRECTION, NASSAU CC, RIKER'S IS	LAN
	2. Court (if federal co	ourt, name the district;	
	if state court, nam	e the county) EASTERN DISTRICT	
	3. Docket Number: _	12-CV-6075	

		4. Name of the Judge to whom case was assigned: ROSLYNN R.MAUSK
		5. Disposition: (for example: Was the case dismissed? Was it appealed? Is it still pending?) STILL PENDING
		6. Approximate date of filing lawsuit: 11/09/2012
		7. Approximate date of disposition: N/a
П.	Place	of Present Confinement: 18-18 Hazen St.East Elmhurst N.Y. 11370
		A. Is there a prisoner grievance procedure in this institution? Yes (χ) No ()
		B. Did you present the facts relating to your complaint in the prisoner grievance procedure? Yes (x) No ()
		C. If your answer is YES,
		1. What steps did you take? File a grievance
		2. What was the result? Was never call
		D. If your answer is NO, explain why not
		E. If there is no prison grievance procedure in the institution, did you complain to prison authorities? Yes () No ()
		F. If your answer is YES,
		1. What steps did you take?
		2. What was the result?

Ш.

Parties:

	ne second blank. Do the same for additional plaintiffs, if any.)	
A. Name of plainting	ff <u>Brandon McFadden</u>	
Address AMKC	18-18 Hazen St.East Elmhurst NY 11370	
(In item B below, pl	ace the full name and address of each defendant)	
	nts' names and the addresses at which each defendant may be serve de the address for each defendant named.	
Defendant No. 1	City of New York	
efendant No. 2	Central Bookings	
	125-01 Queens Boulevard New York	
	Kew Gardens 11415	
Defendant No. 3	Ms. Srgt. Jane Doe	
Defendant No. 4	Officer John Doe (1)	
Defendant No. 5	Officer John Doe (2)	
Make sure that the defenda	ants listed above are identical to those listed in the caption on page	

Defendant NO.6

Officer John Doe (3)

IV. Statement of Claim:

At around 11:40PM on August 8,2012 at Central Bookings Queens. I was being prosess for my criminal charges when Officer John Doe (1) accused me of having a lighter, light a cigarette in the bull pen.

I was taken out of pen and fully search, nothing was found no lighter or cigarettes I was then took in the front through the metal mac then hand cuff behind my back and refused to let me use the rest room.

I was then taken to the Hospital East Elmhurst without my consent and shot with a drug that gave me a bad reaction, I could be alergic to

IV.A

I explain to the medical staff at Nassau Correctional Center and at AMKC at Riker's Island

EXHIBIT

- (1). Officer John Doe (1) Falsy accused me of controband that I did not poscess. My witness to the incident were inside pen when I was ask to be removed.
- (2). After I was brought back to the front of the bookings I was assulted by Officer John Doe (2) and (3) all because I ask to use the bathroom and they Srgt allow them to contine to disrespect me denying me the restroom. My witness to this abuse was just brought into bookigs in the pen across where they had me cuffed to after I was already process.
- (3). I was taken to hospital without my consent I have paper work that was given to me after I beg the doctor not to shoot me with it haldoe that has given me a bad reaction

V. Relief:	
State what relief you are seeking	if you prevail on your complaint.
	stated for the pain in suffering that I
	till going through everyday. I also want
the Officer whom as	ssault me procecuted to the fullest,
I'm sueing for 2 mi	illion dollars.
	· · · · · · · · · · · · · · · · · · ·
	perjury that on 2/6/2013, I delivered this (Date) be mailed to the United States District Court for the Eastern
District of New York.	
Signed this 6 day	of FEBUARY, 20 13. I declare under penalty of
perjury that the foregoing is true	and correct.
	Brandon McForld Signature of Plaintiff
•	AMCK 18-18 Hazen Street
	Name of Prison Facility
	East Elmhurst, New York 11370
	Address
	895-12-01375
	Prisoner ID#

	ED STATES DISTRICT COURT TERN DISTRICT OF NEW YORK
	Brandon McFadden
	Plaintiff
B	he City of NYC, Central ookings, Correction Officers, gt,ect. REQUEST TO PROCEED IN FORMA PAUPERIS
	Defendant(s)
hereb I state	y request to proceed without being required to prepay fees or costs or give security therefore. that because of my poverty I am unable to pay the costs of said proceeding or to give security ore, and I believe I am entitled to redress. If you are presently employed: a) give the name and address of your employer b) state the amount of your earnings per month
	NONE
•	
2.	If you are NOT PRESENTLY EMPLOYED: a) state the date of start and termination of your last employment b) state your earnings per month. YOU MUST ANSWER THIS QUESTION EVEN IF YOU ARE INCARCERATED NONE
3.	Have you received, within the past twelve months, any money from any source? If so, name the source and the amount of money you received.

©X No □ Yes, \$ _____ ©X No □ Yes, \$ _____

a) Are you receiving any public benefits?

b) Do you receive any income from any other source?

	how much?	
i .	Do you own any apartment, house or building, stocks, bonds, notes, automobiles or other property? If the answer is yes, describe the property and state its approximate value.	
	X No Yes, NO	
•	List the person(s) that you pay money to support and the amount you pay each month. Brandon Jr. McFadden 38 Dollars per month	
•	Do you pay for rent or for a mortgage? If so, how much each month?	
	State any special financial circumstances which the Court should consider.	
und ecla	erstand that the Court shall dismiss this case if I give a false answer to any question in this ration. In addition, if I give a false answer I will be subject to the penalties for perjury.	
dec	lare under the penalty of perjury that the foregoing is true and correct.	

rev. 7/2002

UNITED STATES DISTRICT COURT EASTERN DISTRICT OF NEW YORK

PRISONER AUTHORIZATION

The Prison Litigation Reform Act ("PLRA" or "Act") requires you to pay the full filing fee when bringing a civil action if you are currently incarcerated or detained in any facility. If you do not have sufficient funds in your prison account at the time your action is filed, the Court must assess and collect payments until the entire filing fee of \$350 has been paid, no matter what the outcome of the action.

SIGN AND DATE THE FOLLOWING AUTHORIZATION:

I, Brandon McFadden, request and authorize the facility institution holding me in custody to send to the Clerk of the United States District Court for the Eastern District of New York, a certified copy of my prison account statement for the past six months. I further request and authorize the facility holding me in custody to calculate the amounts specified by 28 U.S.C. § 1915(b), to deduct those amounts from my prison trust fund account (or institutional equivalent), and to disburse those amounts to the United States District Court for the Eastern District of New York. This authorization shall apply to any facility into whose custody I may be transferred.

I UNDERSTAND THAT BY SIGNING AND RETURNING THIS NOTICE TO THE COURT, THE ENTIRE COURT FILING FEE OF \$350 WILL BE PAID IN INSTALLMENTS BY AUTOMATIC DEDUCTIONS FROM MY PRISON TRUST FUND ACCOUNT EVEN IF MY CASE IS DISMISSED.

Branden Mª Foodden	2/6/2013	
Signature of Plaintiff	Date Signed	
N.Y.S.I.D. # 05031808L	_	
Local Prison I.D. # 895-12-01375		
Federal Bureau of Prisons I.D. #		rev. 4//06

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